



## TEAM TIP

8.8

### **Antidotes to Blame**

- *Provide behavioral learning experiences that are designed to challenge and change how people think about blame.*
- *Clarify accountabilities in advance through clear contracting of each party, dialogue, and organizational commitment to support accountability over blame.*
- *Remind yourself that anger, judgment, and criticism prevent effective problem solving. Work constructively with these feelings either before or while actually making decisions.*
- *Work to understand the organizational pressures that are affecting each party in the situation. Sometimes a person's or a team's performance is the result of something unknown to you. Perhaps they are working on an impossible job or do not have enough resources to perform well.*

avoiding focus on long-term solutions to structural or interpersonal issues. Or is it? Blame costs the organization, because people are fearful of standing up and owning what they may have contributed to a situation. Instead, they are tied up in the emotions of the situation. Team Tip 8-8 gives antidotes to blame.

## THE CREATION OF A HUMANE WORKPLACE

For many of us, the slogan “Give Peace a Chance” reminds us of our all too recent past and the great divisions that split our country during the Vietnam War. The brutality of war was something everyone could agree on, although individual positions on the Vietnam War varied from zero tolerance to zealous militarism. Now it is our workplaces that are at times very brutal. The manager in a team-based organization must actively work to ensure that peace is in the workplace, by acknowledging and supporting people's humanity.

In South Africa, the term *Ubuntu* is a new management theory term that, translated from Zulu, means “I can only be me through your eyes.” It comes from the phrase “A human is a human because of other people.” This holds true for the manager as well. Social science and management theories have taken only a part of leadership and substituted it for the whole . . . neglecting a significant portion of what makes us humans and what it means to be human (Bolman and Deal, 1995). Soul, spirit, and the heart of a person at work are central to the meaningful and successful enactment of relationship-centered management. In the health care workplace, we all need a language of moral discourse that permits discussions of ethical, spiritual, cognitive, and psychological issues, connecting them to images of leadership. The absence of a common language does not permit us to truly discuss the humane issues we face in either our operational decision making or our care delivery. There is a kind of taboo associated with talking of spiritual matters or matters of the heart in the workplace. This robs people of their courage and conviction to do what they believe to be right (Whyte, 1994).

Consider some of the track records of contemporary health care organizations. Do any of these examples sound familiar? Layoffs of clinical staff members are employed every time there is red ink, rather than facing the difficult corporate system and behavioral issues. Critical decisions are postponed because of leader uncertainty, causing massive anxiety and low morale. Months of work by chartered work teams are tossed aside, with little understanding of the effort involved. Some managers are dishonest with caregivers, calling downsizing efforts work redesign. Others publicly support change but in private or in small groups predict dire outcomes . . . and then wonder why there is so much anger and militancy in the organization.

Our traditional models of leadership have failed to solve the deepening self-esteem problems of the health care workplace. Organizations are scrambling to downsize in the hope of avoiding extinction. Frazzled and exhausted managers scratch their heads, confronted with new problems for which there are no clear answers. Staff members suffer because, in the midst of confusion, many management groups are simply surfing from one new management fad to another. We lost our way when we forgot that the heart of leadership lies in the hearts and souls of leaders. We fooled ourselves into believing that flow charts could respond to our deepest concerns. To recapture our humanity we need to learn how to lead with our soul and create community.

Soul and spirit are defined differently. *Soul* is personal and unique, grounded in the depths of your human experience. *Spirit*, on the other hand, is that special community of an organization filled with people who embrace shared values, goals, and vision (Moore, 1991). Managers with soul bring humanity into the health care workplace.

The relationship-centered manager works to leave behind the mechanistic mental models of the past and instead creates a humane workplace with four kinds of relationships: care, power, ownership, and significance.



## WORDS of WISDOM

*Be careful to avoid becoming personally involved, you might just forget the organization's interpretation of this event.*



### QUESTIONS OF CARE

How do you express passion in your organization? How do people know you care? We have been taught as managers to remain objective at the price of authentic relationships. The price we have paid for adopting this practice is large human resource departments whose job is to tell you what the staff members are thinking and feeling. Do you know if your followers care about you? Care is contagious. Care cannot only be expressed once a year during hospital week or at Christmas when managers serve employees meals.

Care is expressed in the act of being fully present on a day-to-day basis. What do you do that signals your devotion to the growth and development of your teams?

When you have to take a layoff action, do you personally talk to those who have been laid off? The lesson to be learned is that you get what you give. Many contemporary managers have not even recognized that they have already lost something! The potential of teams is diminished when managers fail to create work relationships grounded in caring and compassion.

### QUESTIONS OF POWER

We have to let go of the misconception that management is expressed through individual heroism. Unfortunately, the individual pursuit of heroism is alive and well in the ranks of health care management. Some managers compete with one another to see who is the best hero, who is the best wagger of war, who is the best champion of great causes, or who is the hero for single-handedly changing the course of an organization—this month! With heroism comes a certain amount of influence and power. The question of course is whether the heroism is enacted for the benefit of those we serve or for the pursuit of one's own career agenda.

Consider the nurse executive whose major career goal was to be accepted into the American Academy of Nursing. Any innovation she chose to adopt was carefully selected with that goal in mind, rather than the needs of those she served in her administrative capacity. You can easily tell if this phenomenon is operational in your own organization. The self-serv-

ing hero rarely has the stamina to see an innovation all the way to completion, often moving on to a “greater career opportunity” when transformation becomes challenging.

Another archetypal hero common to health care is the autonomous lonely Superwoman, living on the fringe of society. People who emulate this hero model of leadership often pay a heavy personal price: alienation, feelings of failure, stress-related illness, and even early death. They create situations where their teams have unmitigated loyalty to the leader, even when the leader is embarked in the wrong direction. Team members are robbed of a sense of their own competence. Teams never experience the influence that can be derived from their achievements, because they live in the shadow of their hero.

Team-based organization must operate in the context of community and shared power. Hero-managers do not create this environment. Building community means that successful managers embody their teams’ most precious values and beliefs. Managers’ ability to lead will emerge from the strengths and sustenance of those around them. You must be able to engage in relationship-building activities that help both individuals and teams to develop the capacity for their own heroism.

Stripping people of their power results in a powerless organization where people simply look for ways to fight back, sabotage, withdraw, or engage in militancy. When power is hoarded, conflict is often suppressed, and when it does emerge it is in coercive or explosive forms. Team-based organizations find more productive ways to handle conflict. Sharing power always creates difficult choice points and struggle with letting go or holding the reins too tightly. Team-based systems demand that conflict be resolved without physical or emotional bloodshed, but with grace and dignity. It begins with managers themselves.

## QUESTIONS OF OWNERSHIP

How do you act when you feel that you have influence? Do you create those conditions for others? Can you recognize that managers rob people



## WORDS of WISDOM

*The definition of a superhero is a person we created to let ourselves off the hook.*



of influence when they allow upward delegation or when they accept those things that the staff members can solve themselves as management problems? Can you admit the fact that as managers, we love being the people who solve the tough problems?

The outcome? We let people off the hook, protecting them from making mistakes and learning. Meanwhile, we rarely have time to see the big picture because we are so swamped in daily problem solving. In Japan, it is the group's job to solve the problem of the leader (Bolman and Deal, 1995).

It is up to you to break the cycle of control and taking credit for the hard work of others. This is none other than a subtle way of hoarding power . . . not as blatant as flaming oppression but just as powerful.

Managers in team-based systems create the opportunities for people to put their own signature in their work. This stimulates the sheer human joy of providing a service of lasting value and adding something of value to the delivery of care. People need to see their work as meaningful and worthwhile, to feel personally accountable for the consequence of their efforts, and to get feedback that tells them the results of their action.

Ownership begins with autonomy and power. One cannot own without the ability to influence outcomes. They need each other, in that both are only meaningful in relationship to others. Power without authorship is destructive, and authorship without influence is meaningless (Bolman and Deal, 1995).

## **QUESTIONS OF SIGNIFICANCE**

What are the times when you felt significant? How did people mark the special moments in your life? Maybe what works for you will work in your organization. You cannot impose significance; it has to be created together. Significance comes from working with others to do something worthwhile.

How much of the work performed by people in your organizations is experienced by them to be insignificant? For people to experience signifi-

cance, the organization has to be *ours*, not mine. Can you think of a time in your organization when as a whole, you felt the significance of accomplishment? Maybe it was a successful accreditation survey. Perhaps it was the formal ceremony signaling the passing of the torch from management to teams or the resolution of a particularly difficult situation. In team-based organizations, the manager is challenged to make significance a part of the health care work experience. Rituals, stories, ceremonies, or T-shirts can build significance. They must be authentic, shared, and able to fire the imagination and heart. These symbols, rooted in real values, cannot be allowed to disappear in times of crisis. Box 8-3 provides an example of significance run amuck.

## THROUGH THE LOOKING GLASS

The key to new forms of managing begins with your own personal work. In our experience, the failure to truly transform ourselves and our organizations lies in managers' lack of willingness to look in the mirror and to see both the beauty and the beast . . . and to act on what is authentically seen.

To act on the creation of a humane workplace means to examine your relationships in the context of caring, ownership, power, and significance. Determine how these human experiences affect the people where you practice. The next step is to eliminate those that are barriers to an authentic team-based workplace.

Managers in team-based organizations have no authority except that which comes from wisdom, competence, experience, and relationships. They know that in times of difficulty, teams must try to learn again. These leaders provide the nucleus on which teams develop and grow. Leaders who will share their humanity with us if we ask them . . . leaders who love.

### BOX 8-3

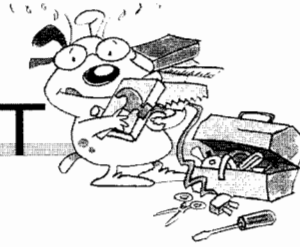
#### *Example from the Field*

A certain company began its reengineering efforts by surveying its employees. Based on survey feedback, they made certain changes, including upgrading the toilet paper in the employee bathrooms and establishing casual dress days on Fridays. In the next phase of the project, they eliminated 5000 jobs! An enterprising group of remaining employees created and wore T-shirts that read: "Two-ply. No Tie. Good-Bye."

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# TOOLCHEST



## TOOL A: Evaluating Your Team's Work Processes

**Instructions:** Select one of the most recent decisions made by your team. Have each member make an assessment of the decision and the degree to which he or she feels committed to it. Next, openly review the team's accountability contract. Instruct each member to privately complete his or her own assessment of the team's performance, answering the questions below. Ask members to privately compare each member's earlier assumptions and commitment to the selected decision with their own before answering each question. The leader or outside facilitator then leads the team in a discussion of each member's responses to the items, looking for commonalities and differences with the team's work processes. Work to come to consensus on work processes that everyone can agree are fair.

1. How satisfied are you with your team's most recent decision?
2. To what extent does the plan reflect the ideas and viewpoints of all of the members?
3. What process did you use to arrive at the plan and to determine which ideas to incorporate and which to exclude?
4. How satisfied are you with this process? Which elements of the process pleased you? Which displeased you?
5. How did the process fit with the team's accountability guidelines, developed by all of you when you first came together as a team?
6. Did everyone participate in the discussion? If so, how did the group achieve total participation? If not, what inhibited the participation of some members?
7. What member behaviors helped support group work?
8. What behaviors hindered group work?
9. As you worked together, how did you handle conflict?
10. How did this activity reflect the way in which you typically work together? What atypical behaviors arose? How can you use this information in your work together in the future?
11. What are the benefits of working together in your particular team to solve problems? What can you do to ensure that your collective expertise is applied in future team efforts at problem solving?
12. What are the drawbacks to team efforts? How can you help overcome some of these drawbacks?
13. Did you have the information you needed to make decisions? What was the quality of that information?



## **TOOLB: Trust Dialogue**

**Instructions:** The list of questions below is designed to stimulate team discussions of trust-related topics. Each team member takes a few minutes to ask a question. Going around the group, each member responds to the question. Once feedback has been obtained from every member, including the person asking the question, the team evaluates itself for trust-busting activities. Questions to be asked and answered include the following: Is there a team trust issue that we can identify from the discussion of this question? If so, what do we need to do? The following ground rules should be applied when engaged in this dialogue:

- Take turns in asking questions to the team as a whole. Each team member must select a question to ask of the team.
- Each member must participate in answering the question that he or she asks.
- Use active listening, paraphrasing, and summarizing skills to ensure that you understand what each person is communicating.
- Before beginning this dialogue, review expectations of confidentiality.

### **Questions of Trust**

1. What do we think the next step is in our team's development?

2. How do we feel about ourselves as members of this team?
3. Are there any personal temperaments of team members that are getting in the way of the team's work? If so, how can we deal with these?
4. How do you perceive of me as a member of this team?
5. What would you predict to be my assessment of each of you?
6. What kind of relationship does each of us want with our team?
7. What factors in your job situation impede your ability to contribute to this team?
8. Are there certain group members with whom you have the most difficulty in understanding their perspective? What is it about that point of view? How do you react?
9. On a scale of 1 to 10 (with 10 being full commitment and 1 being no commitment), how committed are you to the work of this team?
10. What role do you play in this team?
11. How do you want to receive feedback from this team?
12. What issues do you think the team must face together?